

# CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating web-based and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 - description of the intervention) may also be applicable for other study designs.

The goal of the CONSORT EHEALTH checklist and guideline is to be

- a) a guide for reporting for authors of RCTs,
- b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the checklist.

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (non-pharmacologic treatment) items.

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE OF THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red \*.

In the textboxes, either copy & paste the relevant sections from your manuscript into this form - please include any quotes from your manuscript in QUOTATION MARKS, or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED).

Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF \_AND\_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE !!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the caption):

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and Mobile Health Interventions

J Med Internet Res 2011;13(4):e126

URL: <http://www.jmir.org/2011/4/e126/>

doi: 10.2196/jmir.1923

Some questions still need attention

**Your name \***

First Last

Mohamad Alameddine

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**Your e-mail address \***[abc@gmail.com](mailto:abc@gmail.com)

ma164@aub.edu.lb

**Title of your manuscript \***

Provide the (draft) title of your manuscript.

Could Low-Cost Mobile Health Interventions Make a Difference?: Enhancing Outcomes of Noncommunicable Diseases Care in Rural Settings and Refugee Camps

**Name of your App/Software/Intervention \***

If there is a short and a long/alternate name, write the short name first and add the long name in brackets.

eSahha mHealth intervention

**Evaluated Version (if any)**

e.g. "V1", "Release 2017-03-01", "Version 2.0.27913"

Your answer

Some questions still need attention

**Language(s) \***

What language is the intervention/app in? If multiple languages are available, separate by comma (e.g. "English, French")

Arabic

**URL of your Intervention Website or App \***

e.g. a direct link to the mobile app on app in appstore (itunes, Google Play), or URL of the website. If the intervention is a DVD or hardware, you can also link to an Amazon page.

<https://website.aub.edu.lb/fhs/publicprofi>

**URL of an image/screenshot (optional)**

Your answer

**Accessibility \***

Can an enduser access the intervention presently?

- access is free and open
- access only for special usergroups, not open
- access is open to everyone, but requires payment/subscription/in-app purchases
- app/intervention no longer accessible
- Other:

**Primary Medical Indication/Disease/Condition \***

e.g. "Stress", "Diabetes", or define the target group in brackets after the condition, e.g. "Autism (Parents of children with)", "Alzheimers (Informal Caregivers of)"

Diabetes, Hypertension

Some questions still need attention

## Primary Outcomes measured in trial \*

comma-separated list of primary outcomes reported in the trial

Blood Pressure Control, Mean HbA1c

## Secondary/other outcomes

Are there any other outcomes the intervention is expected to affect?

Your answer

## Recommended "Dose" \*

What do the instructions for users say on how often the app should be used?

- Approximately Daily
- Approximately Weekly
- Approximately Monthly
- Approximately Yearly
- "as needed"
- Other:

Some questions still need attention

### Approx. Percentage of Users (starters) still using the app as recommended after 3 months \*

- unknown / not evaluated
- 0-10%
- 11-20%
- 21-30%
- 31-40%
- 41-50%
- 51-60%
- 61-70%
- 71%-80%
- 81-90%
- 91-100%
- Other:

### Overall, was the app/intervention effective? \*

- yes: all primary outcomes were significantly better in intervention group vs control
- partly: SOME primary outcomes were significantly better in intervention group vs control
- no statistically significant difference between control and intervention
- potentially harmful: control was significantly better than intervention in one or more outcomes
- inconclusive: more research is needed
- Other:

Some questions still need attention

## Article Preparation Status/Stage \*

At which stage in your article preparation are you currently (at the time you fill in this form)

- not submitted yet - in early draft status
- not submitted yet - in late draft status, just before submission
- submitted to a journal but not reviewed yet
- submitted to a journal and after receiving initial reviewer comments
- submitted to a journal and accepted, but not published yet
- published
- Other:

## Journal \*

If you already know where you will submit this paper (or if it is already submitted), please provide the journal name (if it is not JMIR, provide the journal name under "other")

- not submitted yet / unclear where I will submit this
- Journal of Medical Internet Research (JMIR)
- JMIR mHealth and UHealth
- JMIR Serious Games
- JMIR Mental Health
- JMIR Public Health
- JMIR Formative Research
- Other JMIR sister journal
- Other:

## Is this a full powered effectiveness trial or a pilot/feasibility trial? \*

- Pilot/feasibility

Some questions still need attention

## Manuscript tracking number \*

If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of each published article in JMIR)

- no ms number (yet) / not (yet) submitted to / published in JMIR
- Other: JMU ms#8146

## TITLE AND ABSTRACT

### 1a) TITLE: Identification as a randomized trial in the title

#### 1a) Does your paper address CONSORT item 1a? \*

I.e does the title contain the phrase "Randomized Controlled Trial"? (if not, explain the reason under "other")

- yes
- Other:

#### 1a-i) Identify the mode of delivery in the title

Identify the mode of delivery. Preferably use "web-based" and/or "mobile" and/or "electronic game" in the title. Avoid ambiguous terms like "online", "virtual", "interactive". Use "Internet-based" only if Intervention includes non-web-based Internet components (e.g. email), use "computer-based" or "electronic" only if offline products are used. Use "virtual" only in the context of "virtual reality" (3-D worlds). Use "online" only in the context of "online support groups". Complement or substitute product names with broader terms for the class of products (such as "mobile" or "smart phone" instead of "iphone"), especially if the application runs on different platforms.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem 1a-i? \*

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Could Low-Cost Mobile Health Interventions Make a Difference?: Enhancing Outcomes of Noncommunicable Diseases Care in Rural Settings and Refugee Camps

## 1a-ii) Non-web-based components or important co-interventions in title

Mention non-web-based components or important co-interventions in title, if any (e.g., "with telephone support").

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 1a-ii?

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 1a-iii) Primary condition or target group in the title

Mention primary condition or target group in the title, if any (e.g., "for children with Type I Diabetes")  
Example: A Web-based and Mobile Intervention with Telephone Support for Children with Type I Diabetes: Randomized Controlled Trial

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| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem 1a-iii? \*

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Could Low-Cost Mobile Health Interventions Make a Difference?: Enhancing Outcomes of Noncommunicable Diseases Care in Rural Settings and Refugee Camps

## 1b) ABSTRACT: Structured summary of trial design, methods, results, and conclusions

NPT extension: Description of experimental treatment, comparator, care providers, centers, and blinding status.

### 1b-i) Key features/functionality/components of the intervention and comparator in the METHODS section of the ABSTRACT

Mention key features/functionality/components of the intervention and comparator in the abstract. If possible, also mention theories and principles used for designing the site. Keep in mind the needs of systematic reviewers and indexers by including important synonyms. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 1b-i? \*

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"community trial in which centers were allocated randomly into control and intervention sites."

Some questions still need attention

## 1b-ii) Level of human involvement in the METHODS section of the ABSTRACT

Clarify the level of human involvement in the abstract, e.g., use phrases like “fully automated” vs. “therapist/nurse/care provider/physician-assisted” (mention number and expertise of providers involved, if any). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 1b-ii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 1b-iii) Open vs. closed, web-based (self-assessment) vs. face-to-face assessments in the METHODS section of the ABSTRACT

Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic or a closed online user group (closed usergroup trial), and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment). Clearly say if outcomes were self-assessed through questionnaires (as common in web-based trials). Note: In traditional offline trials, an open trial (open-label trial) is a type of clinical trial in which both the researchers and participants know which treatment is being administered. To avoid confusion, use “blinded” or “unblinded” to indicated the level of blinding instead of “open”, as “open” in web-based trials usually refers to “open access” (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
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| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 1b-iii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

Some questions still need attention

## 1b-iv) RESULTS section in abstract must contain use data

Report number of participants enrolled/assessed in each group, the use/uptake of the intervention (e.g., attrition/adherence metrics, use over time, number of logins etc.), in addition to primary/secondary outcomes. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 1b-iv?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 1b-v) CONCLUSIONS/DISCUSSION in abstract for negative trials

Conclusions/Discussions in abstract for negative trials: Discuss the primary outcome - if the trial is negative (primary outcome not changed), and the intervention was not used, discuss whether negative results are attributable to lack of uptake and discuss reasons. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 1b-v?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## INTRODUCTION

### 2a) In INTRODUCTION: Scientific background and explanation of rationale

Some questions still need attention

## 2a-i) Problem and the type of system/solution

Describe the problem and the type of system/solution that is object of the study: intended as stand-alone intervention vs. incorporated in broader health care program? Intended for a particular patient population? Goals of the intervention, e.g., being more cost-effective to other interventions, replace or complement other solutions? (Note: Details about the intervention are provided in "Methods" under 5)

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 2a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"According to recent reports, Lebanon faces an elevated NCDs-related mortality reaching as high as 85%...Exploring innovative and effective strategies that can complement existing traditional care remains necessary in such settings to appropriately tackle the growing trend of NCDs in the country."

## 2a-ii) Scientific background, rationale: What is known about the (type of) system

Scientific background, rationale: What is known about the (type of) system that is the object of the study (be sure to discuss the use of similar systems for other conditions/diagnoses, if appropriate), motivation for the study, i.e. what are the reasons for and what is the context for this specific study, from which stakeholder viewpoint is the study performed, potential impact of findings [2]. Briefly justify the choice of the comparator.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem 2a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"number of academic studies showed that mHealth helps improve prevention and control of diseases, including HTN and diabetes, by providing targeted interventions to disadvantaged populations living in remote areas where health services are often limited"

## 2b) In INTRODUCTION: Specific objectives or hypotheses

## Does your paper address CONSORT subitem 2b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"This study aims to assess the effect of employing a low-cost mHealth intervention on access to health services and improvement of health indicators of individuals suffering from NCDs in rural areas and refugee camps in Lebanon."

## METHODS

## 3a) Description of trial design (such as parallel, factorial) including allocation ratio

Some questions still need attention

### Does your paper address CONSORT subitem 3a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"This study reports on a community trial in which PHC centers, along their respective catchment areas, were randomly allocated into control and intervention sites.. The study population comprised sixteen PHCCs in Lebanon: ten located in rural areas and belonging to the Lebanese MOPH PHC National Network [52] and six are UNRWA centers chosen from Palestinian refugee camps in Lebanon. These centers were randomly assigned into intervention and control groups. Five MOPH and three UNRWA centers were allocated to each of the intervention and control groups for a total of eight sites in each of the groups."

### 3b) Important changes to methods after trial commencement (such as eligibility criteria), with reasons

### Does your paper address CONSORT subitem 3b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No changes were done

### 3b-i) Bug fixes, Downtimes, Content Changes

Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem 3b-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 4a) Eligibility criteria for participants

### Does your paper address CONSORT subitem 4a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The inclusion criteria of the records of patients during the QIs collection periods was based on the health status and age of the patients. To be included in this study, patients had to be registered at the PHCCs as diabetics or hypertensive and aged 40 years or more. Only Lebanese patients registered at the included MOPH PHCCs in rural areas and Palestinian refugee patients registered at the included UNRWA health centers were eligible for inclusion if the aforementioned criteria were met."

### 4a-i) Computer / Internet literacy

Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 4a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

Some questions still need attention

#### 4a-ii) Open vs. closed, web-based vs. face-to-face assessments:

Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

#### Does your paper address subitem 4a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The overall eSahha intervention consisted of two related components: one that is community-based and another that is PHC center-based. Individuals already diagnosed with or suspected of being diabetic, hypertensive, or both were referred to the nearest intervention PHCC for NCD-specific clinical care and were targeted by SMS messages originating from a preexisting mobile communication platform used for mass messaging hosted by a Lebanese telecommunication company and scheduled for delivery by a research assistant of the research team."

#### 4a-iii) Information giving during recruitment

Information given during recruitment. Specify how participants were briefed for recruitment and in the informed consent procedures (e.g., publish the informed consent documentation as appendix, see also item X26), as this information may have an effect on user self-selection, user expectation and may also bias results.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem 4a-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 4b) Settings and locations where the data were collected

### Does your paper address CONSORT subitem 4b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The study population comprised sixteen PHCCs in Lebanon:

ten located in rural areas and belonging to the Lebanese MOPH PHC National Network and six are UNRWA centers chosen from Palestinian refugee camps in Lebanon.

The eSahha project is a two-pronged mHealth interventional project targeting catchment areas of PHCCs located in Lebanese rural areas and Palestinian refugee camps.."

### 4b-i) Report if outcomes were (self-)assessed through online questionnaires

Clearly report if outcomes were (self-)assessed through online questionnaires (as common in web-based trials) or otherwise.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 4b-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Outcomes were not assessed through online questionnaires

Some questions still need attention

## 4b-ii) Report how institutional affiliations are displayed

Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer rates, use, and reactions with regards to an intervention. (Not a required item – describe only if this may bias results)

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 4b-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

5) The interventions for each group with sufficient details to allow replication, including how and when they were actually administered

## 5-i) Mention names, credential, affiliations of the developers, sponsors, and owners

Mention names, credential, affiliations of the developers, sponsors, and owners [6] (if authors/evaluators are owners or developer of the software, this needs to be declared in a "Conflict of interest" section or mentioned elsewhere in the manuscript).

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 5-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

Some questions still need attention

## 5-ii) Describe the history/development process

Describe the history/development process of the application and previous formative evaluations (e.g., focus groups, usability testing), as these will have an impact on adoption/use rates and help with interpreting results.

|                              |                       |                       |                       |                       |                       |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 5-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 5-iii) Revisions and updating

Revisions and updating. Clearly mention the date and/or version number of the application/intervention (and comparator, if applicable) evaluated, or describe whether the intervention underwent major changes during the evaluation process, or whether the development and/or content was "frozen" during the trial. Describe dynamic components such as news feeds or changing content which may have an impact on the replicability of the intervention (for unexpected events see item 3b).

|                              |                       |                       |                       |                       |                       |           |
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|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 5-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 5-iv) Quality assurance methods

Provide information on quality assurance methods to ensure accuracy and quality of information provided [1], if applicable.

|                |                       |                       |                       |                       |                       |  |
|----------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|
|                | 1                     | 2                     | 3                     | 4                     | 5                     |  |
| subitem not at | <input type="radio"/> |  |

Some questions still need attention

## Does your paper address subitem 5-iv?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

### 5-v) Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used

Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used. Replicability (i.e., other researchers should in principle be able to replicate the study) is a hallmark of scientific reporting.

|                              |                       |                       |                       |                       |                       |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 5-v?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

### 5-vi) Digital preservation

Digital preservation: Provide the **URL** of the application, but as the intervention is likely to change or disappear over the course of the years; also make sure the intervention is archived (Internet Archive, [webcitation.org](http://webcitation.org), and/or publishing the source code or screenshots/videos alongside the article). As pages behind login screens cannot be archived, consider creating demo pages which are accessible without login.

|                              |                       |                       |                       |                       |                       |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 5-vi?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Some questions still need attention

## 5-vii) Access

Access: Describe how participants accessed the application, in what setting/context, if they had to pay (or were paid) or not, whether they had to be a member of specific group. If known, describe how participants obtained "access to the platform and Internet" [1]. To ensure access for editors/reviewers/readers, consider to provide a "backdoor" login account or demo mode for reviewers/readers to explore the application (also important for archiving purposes, see vi).

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 5-vii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"diabetic, hypertensive, or both were referred to the nearest intervention PHCC for NCD-specific clinical care and were targeted by SMS messages originating from a preexisting mobile communication platform used for mass messaging hosted by a Lebanese telecommunication company and scheduled for delivery by a research assistant of the research team."

## 5-viii) Mode of delivery, features/functionality/components of the intervention and comparator, and the theoretical framework

Describe mode of delivery, features/functionality/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description of the content (including where it is coming from and who developed it) [1], "whether [and how] it is tailored to individual circumstances and allows users to track their progress and receive feedback" [6]. This also includes a description of communication delivery channels and – if computer-mediated communication is a component – whether communication was synchronous or asynchronous [6]. It also includes information on presentation strategies [1], including page design principles, average amount of text on pages, presence of hyperlinks to other resources, etc. [1].

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem 5-viii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The Theory of Planned Behavior (TPB) has been used as a scientific grounding for this study at the level of the patients. According to TPB, the desired behavior in this study is accessing NCD care at PHCCs, and is influenced by the intention to perform it, which is, in turn, influenced by three major constructs: 1) perceived social norms, 2) perceived behavioral control, and 3) attitudes toward the behavior (i.e. the associations towards the action).

### 5-ix) Describe use parameters

Describe use parameters (e.g., intended "doses" and optimal timing for use). Clarify what instructions or recommendations were given to the user, e.g., regarding timing, frequency, heaviness of use, if any, or was the intervention used ad libitum.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 5-ix?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

### 5-x) Clarify the level of human involvement

Clarify the level of human involvement (care providers or health professionals, also technical assistance) in the e-intervention or as co-intervention (detail number and expertise of professionals involved, if any, as well as "type of assistance offered, the timing and frequency of the support, how it is initiated, and the medium by which the assistance is delivered". It may be necessary to distinguish between the level of human involvement required for the trial, and the level of human involvement required for a routine application outside of a RCT setting (discuss under item 21 – generalizability).

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem 5-x?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

### 5-xi) Report any prompts/reminders used

Report any prompts/reminders used: Clarify if there were prompts (letters, emails, phone calls, SMS) to use the application, what triggered them, frequency etc. It may be necessary to distinguish between the level of prompts/reminders required for the trial, and the level of prompts/reminders for a routine application outside of a RCT setting (discuss under item 21 – generalizability).

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 5-xi? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Community individuals

who were diagnosed and were receiving necessary care previous to our intervention were sent weekly informative health SMS, as well as customized SMSs reminders to follow up on their scheduled medical appointments "

### 5-xii) Describe any co-interventions (incl. training/support)

Describe any co-interventions (incl. training/support): Clearly state any interventions that are provided in addition to the targeted eHealth intervention, as ehealth intervention may not be designed as stand-alone intervention. This includes training sessions and support [1]. It may be necessary to distinguish between the level of training required for the trial, and the level of training for a routine application outside of a RCT setting (discuss under item 21 – generalizability).

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem 5-xii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A weekly educational health SMS was sent every Monday afternoon for the intervention period of 1 year. SMS content covered different health themes providing health information on lifestyle, dietary habits, body weight, smoking, medications, importance of compliance, as well as symptoms and self-management of HTN and diabetes."

6a) Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed

## Does your paper address CONSORT subitem 6a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Data on BP (systolic blood pressure, SBP or diastolic blood pressure, DBP), HbA1c, smoking status, as well as dates of eye and foot check-ups were obtained". "One QI collector was hired at each of the sixteen PHCCs included in the study (both intervention and control) to collect relevant QIs from patients' records at two points in time: (1) at baseline period, also noted as the preintervention period, where QIs were collected from records of all patients visiting included PHCCs for the 1-year preintervention period from March 2014 to March 2015 and (2) after delivery of intervention, also noted as the postintervention period, where QIs were collected from records of patients visiting the PHCCs for the 1-year intervention period from June 2015 to June 2016 "

Some questions still need attention

### 6a-i) Online questionnaires: describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed

If outcomes were obtained through online questionnaires, describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed [9].

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 6a-i?

Copy and paste relevant sections from manuscript text

Your answer

### 6a-ii) Describe whether and how “use” (including intensity of use/dosage) was defined/measured/monitored

Describe whether and how “use” (including intensity of use/dosage) was defined/measured/monitored (logins, logfile analysis, etc.). Use/adoption metrics are important process outcomes that should be reported in any ehealth trial.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 6a-ii?

Copy and paste relevant sections from manuscript text

Your answer

### 6a-iii) Describe whether, how, and when qualitative feedback from participants was obtained

Describe whether, how, and when qualitative feedback from participants was obtained (e.g., through emails, feedback forms, interviews, focus groups).

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem 6a-iii?

Copy and paste relevant sections from manuscript text

Your answer

6b) Any changes to trial outcomes after the trial commenced, with reasons

## Does your paper address CONSORT subitem 6b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No changes to outcomes

7a) How sample size was determined

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

7a-i) Describe whether and how expected attrition was taken into account when calculating the sample size

Describe whether and how expected attrition was taken into account when calculating the sample size.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 7a-i?

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

7b) When applicable, explanation of any interim analyses and

Some questions still need attention

## Does your paper address CONSORT subitem 7b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No interim analysis was performed

## 8a) Method used to generate the random allocation sequence

NPT: When applicable, how care providers were allocated to each trial group

## Does your paper address CONSORT subitem 8a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Using a random number generator

## 8b) Type of randomisation; details of any restriction (such as blocking and block size)

## Does your paper address CONSORT subitem 8b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"These centers were randomly assigned into intervention and control groups. Five MOPH and three UNRWA centers were allocated to each of the intervention and control groups for a total of eight sites in each of the groups."

## 9) Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned

Some questions still need attention

## Does your paper address CONSORT subitem 9? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No concealment was applied as this is a community trial where randomization occurred at the level of the primary healthcare centers.

## 10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

### Does your paper address CONSORT subitem 10? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

3rd author who is a biostatistician generated the random allocation sequence. "The community-based component included community screening for HTN and diabetes by trained community health workers among individuals falling within the age group at higher risk of developing NCDs—40 years or older—in the catchment areas of the eight intervention centers."

## 11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how

NPT: Whether or not administering co-interventions were blinded to group assignment

### 11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).

1                      2                      3                      4                      5

Some questions still need attention

## Does your paper address subitem 11a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

no blinding was implemented

## 11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator".

|                              |                       |                       |                       |                       |                       |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 11a-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 11b) If relevant, description of the similarity of interventions

(this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

## Does your paper address CONSORT subitem 11b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The control group received no intervention

Some questions still need attention

## 12a) Statistical methods used to compare groups for primary and secondary outcomes

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

### Does your paper address CONSORT subitem 12a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Pearson chi-square test ( $\chi^2$ ) and independent t test were used to assess the difference in quality indicators before and after the intervention. "

### 12a-i) Imputation techniques to deal with attrition / missing values

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 12a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No imputation was done. Missing values were not included in the analysis.

## 12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

Some questions still need attention

## Does your paper address CONSORT subitem 12b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Logistic regression was used to evaluate the impact of the intervention on HbA1c poor control, BP control, and annual HbA1c testing, while controlling for age, gender, and setting. Similarly, linear regression was used to assess the impact on mean SBP, DBP, and HbA1c, while controlling for age, gender, and setting. All analyses were carried at a .05 significance level."

X26) REB/IRB Approval and Ethical Considerations [recommended as subheading under "Methods"] (not a CONSORT item)

### X26-i) Comment on ethics committee approval

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem X26-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

### x26-ii) Outline informed consent procedures

Outline informed consent procedures e.g., if consent was obtained offline or online (how? Checkbox, etc.), and what information was provided (see 4a-ii). See [6] for some items to be included in informed consent documents.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem X26-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## X26-iii) Safety and security procedures

Safety and security procedures, incl. privacy considerations, and any steps taken to reduce the likelihood or detection of harm (e.g., education and training, availability of a hotline)

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem X26-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## RESULTS

13a) For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome

NPT: The number of care providers or centers performing the intervention in each group and the number of patients treated by each care provider in each center

## Does your paper address CONSORT subitem 13a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The data of 1433 patients in the intervention groups and 926 patients in the control groups were included in the analysis"

Some questions still need attention

13b) For each group, losses and exclusions after randomisation, together with reasons

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The study design does not allow for measurement of attrition rate.

### 13b-i) Attrition diagram

Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the intervention/comparator in each group plotted over time, similar to a survival curve) or other figures or tables demonstrating usage/dose/engagement.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 13b-i?

Copy and paste relevant sections from the manuscript or cite the figure number if applicable (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

14a) Dates defining the periods of recruitment and follow-up

Some questions still need attention

## Does your paper address CONSORT subitem 14a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"QIs were collected from records of all patients visiting included PHCCs for the 1-year preintervention period from March 2014 to March 2015 and (2) after delivery of intervention, also noted as the postintervention period, where QIs were collected from records of patients visiting the PHCCs for the 1-year intervention period from June 2015 to June 2016."

## 14a-i) Indicate if critical "secular events" fell into the study period

Indicate if critical "secular events" fell into the study period, e.g., significant changes in Internet resources available or "changes in computer hardware or Internet delivery resources"

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 14a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 14b) Why the trial ended or was stopped (early)

## Does your paper address CONSORT subitem 14b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable.

Some questions still need attention

### 15) A table showing baseline demographic and clinical characteristics for each group



NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and centers (volume) in each group

#### Does your paper address CONSORT subitem 15? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Please refer to Table 2

#### 15-i) Report demographics associated with digital divide issues

In ehealth trials it is particularly important to report demographics associated with digital divide issues, such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the participants, if known.

|                              |                       |                       |                       |                       |                       |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
| subitem not at all important | <input type="radio"/> | essential |

#### Does your paper address subitem 15-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Please refer to Table 2

### 16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups



Some questions still need attention

## 16-i) Report multiple “denominators” and provide definitions

Report multiple “denominators” and provide definitions: Report N’s (and effect sizes) “across a range of study participation [and use] thresholds” [1], e.g., N exposed, N consented, N used more than x times, N used more than y weeks, N participants “used” the intervention/comparator at specific pre-defined time points of interest (in absolute and relative numbers per group). Always clearly define “use” of the intervention.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 16-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

All data reported included valid denominators.

## 16-ii) Primary analysis should be intent-to-treat

Primary analysis should be intent-to-treat, secondary analyses could include comparing only “users”, with the appropriate caveats that this is no longer a randomized sample (see 18-i).

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 16-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)

Some questions still need attention

## Does your paper address CONSORT subitem 17a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 3 includes effect sizes for primary and secondary outcomes with p-values to indicate statistical significance.

### 17a-i) Presentation of process outcomes such as metrics of use and intensity of use

In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure metrics such as "average session length". These must be accompanied by a technical description how a metric like a "session" is defined (e.g., timeout after idle time) [1] (report under item 6a).

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem 17a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

17b) For binary outcomes, presentation of both absolute and relative effect sizes is recommended

## Does your paper address CONSORT subitem 17b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 3 shows absolute effect size with frequencies and percentages whereas table 4 shows relative effect size using odds ratios at 95% CI.

Some questions still need attention

## 18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory

### Does your paper address CONSORT subitem 18? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This has not been done in our study.

### 18-i) Subgroup analysis of comparing only users

A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii).

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 18-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 19) All important harms or unintended effects in each group

(for specific guidance see CONSORT for harms)

### Does your paper address CONSORT subitem 19? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This study was labeled as of minimal risk as per the ethical review board - no harms or unintended effects took place.

Some questions still need attention

## 19-i) Include privacy breaches, technical problems

Include privacy breaches, technical problems. This does not only include physical "harm" to participants, but also incidents such as perceived or real privacy breaches [1], technical problems, and other unexpected/unintended incidents. "Unintended effects" also includes unintended positive effects [2].

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 19-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 19-ii) Include qualitative feedback from participants or observations from staff/researchers

Include qualitative feedback from participants or observations from staff/researchers, if available, on strengths and shortcomings of the application, especially if they point to unintended/unexpected effects or uses. This includes (if available) reasons for why people did or did not use the application as intended by the developers.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 19-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

DISCUSSION 

Some questions still need attention

## 22) Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence

NPT: In addition, take into account the choice of the comparator, lack of or partial blinding, and unequal expertise of care providers or centers in each group

### 22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use)

Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 22-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"First of its kind in the country, the study revealed promising findings in regards to the use of mobile phone SMS technology to improve the management of NCDs among individuals living in rural areas and Palestinian refugee camps in Lebanon."

### 22-ii) Highlight unanswered new questions, suggest future research

Highlight unanswered new questions, suggest future research.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem 22-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

20) Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses

### 20-i) Typical limitations in ehealth trials

Typical limitations in ehealth trials: Participants in ehealth trials are rarely blinded. Ehealth trials often look at a multiplicity of outcomes, increasing risk for a Type I error. Discuss biases due to non-use of the intervention/usability issues, biases through informed consent procedures, unexpected events.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

Some questions still need attention

## Does your paper address subitem 20-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A number of limitations in this study are worth mentioning. Data on age and gender of certain participants in both the intervention and control groups were missing. In addition, the study is characterized by its large sample size, which may have led to statistical significance without necessarily a parallel clinical or practical significance. Our results cannot be solely attributed to our intervention; the presence of advanced NCD programs at both the MOPH and UNRWA PHCC networks may have biased the findings, especially in the cases where a control site showed a significant change. Given that in some cases the owners of the phone numbers to which the SMSs were sent were not the patients themselves but rather family members, the interventional SMS messages may have not been transmitted to their final recipients (i.e. patients) who are the target population of our study.

Other limitations may be embedded in the design of the intervention itself. For example, patients of low literacy level may have not benefitted optimally from the intervention because of a decreased capacity of understanding its content. Thus, it is worth bringing to attention for future research the need for pilot testing the SMS text messages interventions with individuals of low literacy level, using further simplified content of messages, and more importantly coupling SMS text messages with voice messages to enhance equitable access of illiterate patients to the information shared".

## 21) Generalisability (external validity, applicability) of the trial findings

NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

Some questions still need attention

## 21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 21-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

## 21-ii) Discuss if there were elements in the RCT that would be different in a routine application setting

Discuss if there were elements in the RCT that would be different in a routine application setting (e.g., prompts/reminders, more human involvement, training sessions or other co-interventions) and what impact the omission of these elements could have on use, adoption, or outcomes if the intervention is applied outside of a RCT setting.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

### Does your paper address subitem 21-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

OTHER INFORMATION 

23) Registration number and name of trial registry 

Some questions still need attention

**Does your paper address CONSORT subitem 23? \***

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

NCT03580330 - Use of Low-cost mHealth Intervention to Enhance Outcomes of Noncommunicable Diseases Care in Rural and Refugee Settings

**24) Where the full trial protocol can be accessed, if available****Does your paper address CONSORT subitem 24? \***

Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

By contacting the corresponding author

**25) Sources of funding and other support (such as supply of drugs), role of funders****Does your paper address CONSORT subitem 25? \***

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The study was funded by the International Development Research Center (IDRC), Canada.

**X27) Conflicts of Interest (not a CONSORT item)**

Some questions still need attention

## X27-i) State the relation of the study team towards the system being evaluated

In addition to the usual declaration of interests (financial or otherwise), also state the relation of the study team towards the system being evaluated, i.e., state if the authors/evaluators are distinct from or identical with the developers/sponsors of the intervention.

|                              | 1                     | 2                     | 3                     | 4                     | 5                     |           |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|
| subitem not at all important | <input type="radio"/> | essential |

## Does your paper address subitem X27-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

About the CONSORT EHEALTH checklist 

## As a result of using this checklist, did you make changes in your manuscript? \*

- yes, major changes
- yes, minor changes
- no

## What were the most important changes you made as a result of using this checklist?

Your answer

## How much time did you spend on going through the checklist INCLUDING making changes in your manuscript \*

0 hours

Some questions still need attention

As a result of using this checklist, do you think your manuscript has improved? \*

- yes
- no
- Other:

Would you like to become involved in the CONSORT EHEALTH group?

This would involve for example becoming involved in participating in a workshop and writing an "Explanation and Elaboration" document

- yes
- no
- Other:

Any other comments or questions on CONSORT EHEALTH

Your answer

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Some questions still need attention

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